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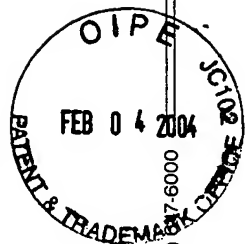
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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Attorney Docket No. BCR-10102/29

Applicant: Herrmann
Serial No.: 10/748,910
Filed: Dec. 24, 2003 (should be Dec. 22, 2003)
For: CUSHION GRIPS FOR SPRAY BOTTLE

PETITION UNDER 37 CFR §1.10(d) TO CORRECT THE FILING DATE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicant's attorney respectfully requests that the filing date of December 22, 2003 be given to the above-identified patent application. Attached hereto are copies of the following documents which support that December 22, 2003 is the correct filing date.

1. A copy of the Pickup Service Statement showing Express Mail Label No. EV340745473US, the attorney docket number, and the date and time of pickup of said package.
2. A letter dated January 20, 2004 from Charles Thomas, Jr. of the Ann Arbor, Michigan Post Office indicating that the subject express mail package was picked up on December 22, 2003, and that the entry of December 24, 2003 was, in fact, filled out by a postal clerk at the recipient's Virginia zip code of 20102.
3. A copy of Express Mail Label No. EV340745473US showing the attorney docket number BCR-10102/29, as referenced above.

Under the circumstances, Applicant does not believe any fee is due at this time. However, if there are any fees associated with this Petition, please charge them to Deposit Account No. 07-1180.

Consideration of this Petition Under 37 CFR §1.10(d) to Correct the Filing Date is respectfully requested.

Respectfully submitted,

John G. Posa, Reg. No. 37,424
Gifford, Krass, Groh, Sprinkle,
Anderson & Citkowski, P.C.
280 N. Old Woodward Ave, Suite 400
Birmingham, MI 48009-5394
(734) 913-9300

Dated: February 2, 2004

GIFFORD, KRASS, GROH, SPRINKLE, ANDERSON & CITKOWSKI, P.C. 280 N. OLD WOODWARD AVENUE, STE. 400, BIRMINGHAM, MICHIGAN 48009-5394 (248) 913-6000

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Herrmann
Serial No.: 10/748,910
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For: CUSHION GRIPS FOR SPRAY BOTTLE

CERTIFICATE OF MAILING UNDER 37 CFR 1.8(a)

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

Dear Sir:

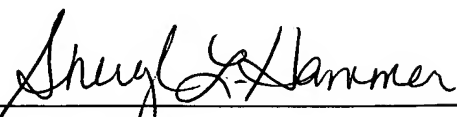
I hereby certify that the attached correspondence comprising:

Petition Under 37 CFR §1.10(d) to Correct the Filing Date
Copy of Pickup Service Statement
Copy of Express Mail Label
Letter from Post Office
Postcard

is being deposited with the United States Postal Service as first class mail in an envelope addressed to:

Mail Stop PETITIONS
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

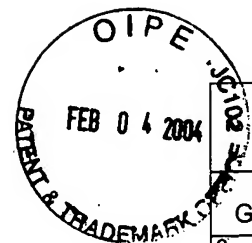
On Feb. 2, 2004.



Sheryl L. Hammer

Routing Slip

To	Dept., Office or Room No.	<input type="checkbox"/> Approval <input type="checkbox"/> Signature <input type="checkbox"/> Comment <input type="checkbox"/> See Me <input type="checkbox"/> As Requested <input checked="" type="checkbox"/> Information <input type="checkbox"/> Read and Return <input type="checkbox"/> Read and File <input type="checkbox"/> Necessary Action <input type="checkbox"/> Investigate <input type="checkbox"/> Recommendation <input type="checkbox"/> Prepare Reply
1. Gifford Krass		
2. Office of the Commisioner for Patents		
3.		
4.		
5.		
6.		
From: Charles Thomas Jr. A/Manager Customer Services Ann Arbor, Michigan 48108-9998 Date: 01/21/2004		Extension 734-662-2009 Room No.
Remarks <p>This letter is in regards to an Express Mail piece mailed from the the office of Gifford Krass at 101 N. Main Street. This particular mailpiece was Express # EV 340745473 US.</p> <p>The envelope was picked up and signed for by a Letter Carrier on December 22nd, 2003. Under normal circumstances a pick up of this type is scanned in at the Main Post Office in Ann Arbor and the information including the zip code, date, time in and service committment would be recorded then.</p> <p>If there is a question of the piece not making the regular dispatch it would be forwarded on to have this information recorded further up into the line of travel leading to delivery. As is indicated on the Express Label, this was not done until it reached Virginia at zip code 20102.</p> <p>Understanding that this mail is date sensitive we verify by the signature of the employee that picked up the mail on the 22nd, that this is the date that should be used as the date of mailing and not the date on the label.</p> <p>If there are any questions please feel free to contact me at (734) 662-2009.</p> <p>Thank you for your consideration in this matter.</p>		



United States Postal Service

Pickup Service Statement

Express Mail, Global Express Guaranteed, Priority Mail, or Parcel Post

1. Customer Information

Customer Name Gifford, Krass, Gryn
 Company Name _____
 Address 1 101 N. Main St #800
 Address 2 _____
 City Ann Arbor
 State MI Zip + 4 48104

2. Product Information

	Quantity
Express Mail	<u>2</u>
Global Express Guaranteed	
Priority Mail	
Parcel Post (Domestic or International)	
Estimated total weight of all packages (In pounds)	

3. Payment Method

☐ Check made payable to "Postmaster" ☐ Merchandise Return Label
☒ Express Mail Corporate Account No. or Federal Agency No. ☐ Postage Due Account
X480320 ☐ Stamps or Metered Postage (Affix at right)

4. Affix Stamps or Meter Strip Here (If applicable)

EV340745473 US (BCR-10102/29)
EV340745460 US (BCR-10202/29)

5. Customer Signature

S. Lanner

6. USPS Signature

Gene [Signature] 4:05 pm

7. Date & Time of Pickup

12/22/03

PS Form 5541 October 2001

2 - Customer



EV 340745473 US



UNITED STATES POSTAL SERVICE®

Customer Copy
Label 11-F June 2002

Post Office To Address

ORIGIN (POSTAL USE ONLY)

PO ZIP Code <u>20102</u>	Day of Delivery <input checked="" type="checkbox"/> Next <input checked="" type="checkbox"/> Second <input type="checkbox"/>	Flat Rate Envelope <input type="checkbox"/>
Date In <u>12 24 03</u>	Postage \$ <u>13.65</u>	
Time In <u>10:10</u>	Military <input type="checkbox"/> 2nd Day <input type="checkbox"/> 3rd Day	Return Receipt Fee
Weight <u>5.4</u> lbs. ozs.	Int'l Alpha Country Code	COD Fee
No Delivery <input type="checkbox"/> Weekend <input type="checkbox"/> Holiday	Acceptance Clerk Initials <u>C</u>	Insurance Fee

DELIVERY (POSTAL USE ONLY)

Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Attempt	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	
Delivery Date	Time	Employee Signature
Mo. Day	<input type="checkbox"/> AM <input type="checkbox"/> PM	

☐ WAIVER OF SIGNATURE (Domestic Only) Additional merchandise insurance is void if waiver of signature is requested. (Wish delivery to be made without obtaining signature of addressee or addressee's agent (if delivery employee judges that article can be left in secure location) and (authorizes that delivery employee's signature constitutes valid proof of delivery).

NO DELIVERY ☐ Weekend ☐ Holiday

CUSTOMER USE ONLY

METHOD OF PAYMENT:

Express Mail Corporate Acct. No. X480320

Federal Agency Acct. No. or Postal Service Acct. No.

FROM: (PLEASE PRINT)

PHONE

734 913 9500

GIFFORD KRASS GRYN & ASSOC PC
 101 N MAIN STE 800
 ANN ARBOR MI 48104-1476

BCR-10102/29

TO: (PLEASE PRINT)

PHONE

MAIL STOP Patent Appln
 COMMISSIONER FOR PATENTS
 P.O. BOX 450
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